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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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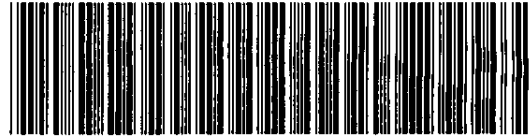
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

J. BRYAN

NOV -2 2010

EXAMINER

BRYAN M. BLACK LAW OFFICES
BRYAN M. BLACK

ATTORNEY AT LAW

4515 11th St.

Kimball, MI. 48074

DIRECT LINE: (810) 987-1111

FAX: (810) 364-6120

BRYAN M. BLACK
DOUGLAS M. BLACK (1935-1995)
EUGENE F. BLACK (1903-1990)
MICHIGAN SUPREME COURT 1956-1973
RANDOLPH J. MARTINEK

MARYSVILLE OFFICE
PHONE: (810) 364-1LAW (1529)
E-MAIL: bryanblack@gmail.com
WEBSITE: www.Black4DC.com

October 28, 2010

Florida Department of State
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

RE: PMMI PORT HURON, LLC
Application By Foreign Limited Liability Company for
Authorization To Transact Business In Florida

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TALLAHASSEE, FLORIDA

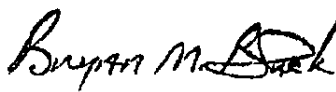
To Whom It May Concern:

Enclosed please find the following items relative to the above entitled matter:

- 1) Cover Letter,
- 2) Application By Foreign Limited Liability Company for Authorization To Transact Business in Florida,
- 3) Certificate Of Designation Of Registered Agent/Registered Office,
- 4) Original Certificate from the State of Delaware of Legal Existence for PMMI PORT HURON, LLC,
- 5) Draft \$160.00

If you have any questions or concerns, please do not hesitate to contact me.

Very truly yours,



Bryan M. Black

BMB/hdl
Enclosures: as stated

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PMMI PORT HURON, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

BRYAN M. BLACK ESQ.

Name of Person

LAW OFFICE OF BRYAN M. BLACK

Firm/Company

4515 11TH ST.

Address

KIMBALL, MI. 48074

City/State and Zip Code

bryanblack@gmail.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Bryan M. Black at (810) 987-1111

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. PMMI PORT HURON, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 80-0236392

(FEI number, if applicable)

4. December 12th, 2007

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease to exist or "perpetual")

6. Has not yet commenced business in Florida

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. Bryan M. Black Esq.

2700 Strawberry Lane, Port Huron, MI. 48060

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

Bryan & Tina Black, 2700 Strawberry Lane, Port Huron, MI. 48060

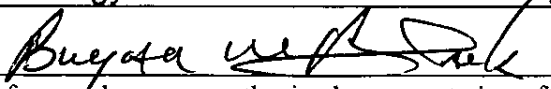
Winn Claybaugh, 1543 Adams Ave. Costa Mesa, CA. 92626

Luke Jacobellis, 9701 Wilshire Blvd. #1205, Beverly Hills, CA 90212

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Vocational School

for the instruction in cosmetology


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Bryan M. Black Esq.

Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

PMMI PORT HURON, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Bryan M. Black Esq.

(Name)

871 San Marco

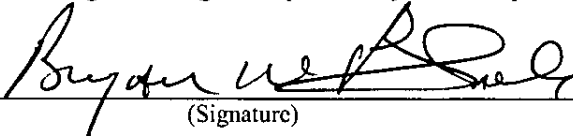
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Marco Island

FL 34145

City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PMMI PORT HURON, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF OCTOBER, A.D. 2010.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8297843

DATE: 10-19-10